



PERMIT APPLICATION

Town of Farmville - 3672 North Main Street; P.O. Box 86 - Farmville, NC 27828
(252) 753-5921 - PHONE (252) 753-2963 - FAX

Date: _____

Application is hereby being made for:

- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING PERMIT * | <input type="checkbox"/> INSULATION PERMIT | <input type="checkbox"/> MECHANICAL PERMIT |
| <input type="checkbox"/> ELECTRICAL PERMIT | <input type="checkbox"/> PLUMBING PERMIT | <input type="checkbox"/> SIGN PERMIT |
| <input type="checkbox"/> FIRE PROTECTION PERMIT | <input type="checkbox"/> MANUFACTURED HOME | <input type="checkbox"/> OTHER: |

***Provide Lien Agent form if applicable**

PROVIDE BUILDING PERMIT NUMBER IF ISSUED: B- _____

DESCRIPTION OF WORK TO BE DONE

Square Footage: _____	# of Gas Lines: _____
# of Plumbing Fixtures: _____	# of HVAC Units: _____

Value of work to be done (Fair Market Value or Contract Price) \$ _____

LOCATION OF PROPOSED WORK:

Street Address: _____	Parcel number: _____
Subdivision Name: _____	Zoning: _____
Owner's Name: _____	Phone: _____
Owner's Address: _____	

Is the Property in the Flood Zone? YES NO Don't Know Zone Designation: _____

If so, Height of lowest finished floor above mean sea elevation? _____

Company Name: _____	NC State License # _____
Contact Name: _____	Work Phone: _____
Address: _____	Cell: _____
City, State, ZIP _____	Fax: _____

NOTICE

I hereby certify that I have read and examined this application and know the same to be true and correct. I also am aware that all work done under the permit shall comply with the latest edition of the North Carolina State Code.

THIS APPLICATION IS NOT A PERMIT

PERMIT WILL BE ISSUED AFTER REVIEW OF COMPLETED APPLICATION

***If agent is signing, notarized letter must be on file to allow agent to pull permits under your license.**

Signature of Contractor/Agent* _____ Date: _____

Signature of Owner (if builder) _____ Date: _____

PLEASE CHARGE THIS PERMIT FEE TO MY CREDIT CARD ON FILE.